## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/538/07

		CI AIMS	AS FILED -	DADT	1				<u></u>			
		Videnii .	(Colum					SMALL EN	TITY	OR	OTHER SMALL I	
Û.٤	S. NATIONAL	STAGE FEES				· · · · · · · · · · · · · · · · · · ·	1	RATE	FEE	7	RATE	FEE
BA	SIC FEE		SMALL ENT	SMALL ENT. = \$ 150		RGE ENT. = \$ 300		BASIC FEE	<del>                                     </del>	OR	BASIC FEE	300
EX	AMINATION FE	EE		Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100		other situations = \$ 100 / \$ 200	1	EXAM. FEE	<del> </del>	1	EXAM. FEE	<del> </del>
SE	ARCH FEE		U.S. is ISA = \$ ALL other cou	U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		All other situations = \$ 250 / \$ 500		SEARCH FEE	<del> </del>	1	SEARCH FEE	400
FEF	E FOR EXTRA	SPEC. PGS.		minus 100 =		/ 50 =	1	X \$ 125 =	<del> </del>		X \$ 250 =	1
тот	TAL CHARGEA	BLE CLAIMS	10 mir	inus 20 =	*			X \$ 25 =	<b></b>	OR	X \$ 50 =	<del> </del>
IND	DEPENDENT CL	LAIMS	/ in	ninus 3 =				X \$ 100 =		OR	<del></del>	<del> </del>
MUI	LTIPLE DEPEN	NDENT CLAIM PRI	KESENT					+ \$ 180 =	<u> </u>	OR	+ \$ 360 =	<del> </del>
* If	the difference	e in column 1 is	less than zero	o, enter "(	J" in cr	olumn 2	1	TOTAL		OR	TOTAL	ann
					,			•	<u></u>	1	•	144
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
NT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	11	X \$ 25 =		OR	X \$ 50 =	
AME	Independent	*	Minus	***		-		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	<del>                                     </del>
<i>+</i>				-			l L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		•						1 444 _			PEC .	
		(Column 1)		(Colum		(Column 3)	,					
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT B	Total	•	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
AMEN	Independent	*	Minus	***		= .		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	SENTATION OF ME	ULTIPLE DEPE	NDENT C	LAIM			+ \$ 180 =		OR	+ \$ 360 =	
							•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
					••	(i						
*	"" = antar la coli	4 to tree than th	t t liman 6	308 1-	2							
**	If the "Highest Nur	umn 1 is less than the umber Previously Paid	Id For" IN THIS SPA	ACE is less t	than '20'	0', enter "20".		•				
	If the "Highest Nur The "Highest Nur	umber Previously Paid mber Previously Paid i	I For IN THIS SPA For (Total or Inde	ACE is less fapendent) is	than '3', the high	enter "3". nest number found	in the	∍ appropriate box	in column 1.			
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